



Commonwealth
of Massachusetts

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

Fill in Reporting Period dates: Beginning Date: 1-1-21 Ending Date: 9-13-21 File with: City or Town Clerk or Election Commission

Type of Report: (Check one)

☒ 8th day preceding preliminary ☐ 8th day preceding election ☐ 30 day after election ☐ year-end report ☐ dissolution

Scott Andrew Martin

Candidate Full Name (if applicable)

City Council

Office Sought and District

31 Cardinal Circle

Residential Address

E-mail:

Phone # (optional):

Comm.tee to Elect Scott A. Martin

Committee Name

Kimberly Kelsey

Name of Committee Treasurer

31 Cardinal Circle 02718

Committee Mailing Address

E-mail:

Phone # (optional):

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report

93.00

Line 2: Total receipts this period (page 3, line 11)

2321.10

Line 3: Subtotal (line 1 plus line 2)

2414.10

Line 4: Total expenditures this period (page 5, line 14)

2282.19

Line 5: Ending Balance (line 3 minus line 4)

131.91

Line 6: Total in-kind contributions this period (page 6)

400.00

Line 7: Total (all) outstanding liabilities (page 7)

0.00

Line 8: Name of bank(s) used:

Mechanics Cooperative Bank

Affidavit of Committee Treasurer:

I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including all contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55.

Signed under the penalties of perjury:

Kimberly Kelsey

(Treasurer's signature)

Date: 9/13/21

FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate (check 1 box only)

Candidate with Committee

☒ I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55. I have not received any contributions, incurred any liabilities nor made any expenditures on my behalf during this reporting period that are not otherwise disclosed in this report.

Candidate without Committee

☐ I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this candidate in accordance with the requirements of M.G.L. c. 55.

Signed under the penalties of perjury:

Scott Martin

(Candidate's signature)

Date: 9-13-21

SCHEDULE A: RECEIPTS

M.G.L. c. 55 requires that the name and residential address be reported, in alphabetical order, for all receipts over \$50 in a calendar year. Committees must keep detailed accounts and records of all receipts, but need only itemize those receipts over \$50. In addition, the occupation and employer must be reported for all persons who contribute \$200 or more in a calendar year.

(A "Schedule A: Receipts" attachment is available to complete, print and attach to this report, if additional pages are required to report all receipts. Please include your committee name and a page number on each page.)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
6/14	Bob Alubicki 1109 Somerset Ave Taunton 02780	150	retired
6/14	Paulo Braga 179 Dexter Farms Rd Taunton 02780	100	
6/14	Cindy Brogan 503 Dighton Ave Taunton 02780	50	
6/14	Ed Correia Field St Taunton 02780	250	Business Owner
6/14	Mike Dupont 1 Macomber St Berkley MA 02784	50	
6/14	John Gouviea Dighton Ave Taunton 02780	150	
6/14	MARY Hein 53 Queen Elizabeth Ln. Taunton 02780	50	
6/14	Dave & Kathy Lewis 54 Middleboro Ave Taunton 02780	100	
6/14	Amelia Cabral 21 Hodges Ave Taunton 02780	50	
6/14	Richard Johnson 9 Oyster Hill Dr. Sandwich 02563	50	
6/14	David & Michael Littlefield 192 Erin Dr. ³¹²³ E. Taunton 02718	100	
6/14	Eileen Mann 12 Paul St. Taunton 02780	50	

Line 9: Total Receipts over \$50 (or listed above)

Line 10: Total Receipts \$50 and under* (not listed above)

Line 11: TOTAL RECEIPTS IN THE PERIOD

← Enter on page 1, line 2

* If you have itemized receipts of \$50 and under, include them in line 9. Line 10 should include only those receipts not itemized above.

SCHEDULE A: RECEIPTS (continued)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
6/14	Lynne McCarthy 78 Plain St. E Berkley 02779	50	
6/14	John McCarroll 2 Commonwealth Ave Taunton 02780	50	
6/14	Teresa Mello 1236 Somerset Ave Taunton 02780	50	
6/14	Steve Palm 80 Powhattan Dr. E Taunton 02718	200	
6/14	Steven Perry PO Box 632 E Taunton 02718	100	
6/14	David Pimental Jr. 50 Highland St. #29 Taunton 02780	50	
6/14	Larry Quintall 20 Broadway Taunton 02780	100	
6/14	G.I. Simmons 20 E. Britannia St Taunton 02780	70	
6/14	Jonathan Siskind 59 R Broadway Taunton 02780	25	
6/14	Charles Smith 38 Maple St Taunton 02780	50	
6/14	EJaTune 34 Blake St Taunton 02780	100	

Line 9: Total Receipts over \$50 (or listed above)

1995

Line 10: Total Receipts \$50 and under* (not listed above)

326.10

Line 11: TOTAL RECEIPTS IN THE PERIOD

2321.10

← Enter on page 1, line 2

* If you have itemized receipts of \$50 and under, include them in line 9. Line 10 should include only those receipts not itemized above.

M.G.L. c. 55 requires committees to list, in alphabetical order, all expenditures over \$50 in a reporting period. Committees must keep detailed accounts and records of all expenditures, but need only itemize those over \$50. Expenditures \$50 and under may be added together, from committee records, and reported on line 13.

(A "Schedule B: Expenditures" attachment is available to complete, print and attach to this report, if additional pages are required to report all expenditures. Please include your committee name and a page number on each page.)

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
7/6/21	BJS Warehouse	2085 Boy St. Taverton MA 02780	Neighborhood concert	\$ 114.99
7/16/21	High Sail Strategies	60 Ferncliffe Rd Seekunk, MA 02771	Consulting	\$ 1500.00
8/13/21	Luka B Signs	39 Tremont St. Taverton, MA 02780	Signs	\$ 359.19
8/24/21	High Sail Strategies	60 Ferncliffe Rd Seekunk, MA 02771	push-curds	\$ 307.01
			Line 12: Total Expenditures over \$50 (or listed above)	
			Line 13: Total Expenditures \$50 and under* (not listed above)	
Enter on page 1, line 4 →			Line 14: TOTAL EXPENDITURES IN THE PERIOD	

* If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above.

SCHEDULE C: "IN-KIND" CONTRIBUTIONS

Please itemize contributors who have made in-kind contributions of more than \$50. In-kind contributions \$50 and under may be added together from the committee's records and included in line 16 on page 1.

[illegible]

* If an in-kind contribution is received from a person who contributes more than \$50 in a calendar year, you must report the name and address of the contributor; in addition, if the contribution is \$200 or more, you must also report the contributor's occupation and employer.

SCHEDULE D: LIABILITIES

M.G.L. c. 55 requires committees to report ALL liabilities which have been reported previously and are still outstanding, as well as those liabilities incurred during this reporting period.

[illegible]